

Department of  
Veterans Affairs

# MEMORANDUM

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June 6, 2002

Chief, Policy and Compliance Division

Transmittal #46 CHAMPVA Policy Manual

See Transmittal Distribution List

1. Explanation of changes and related index updates of the CHAMPVA Policy Manual and filing instructions are in the following summary:

<u>SUMMARY</u>	<u>REMOVE</u>		<u>INSERT</u>	
	<u>C-S</u>	<u>Pages</u>	<u>C-S</u>	<u>Pages</u>
<b>Master Table of Contents.</b> Adds new policy Chapter 2, Section 16.4, <i>Hospice</i> , and Chapter 3, Section 11.1, <i>Hospice Reimbursement</i> ; amends Chapter 2, Section 22.1, title from <i>Drugs and Medicines</i> to <i>Pharmacy</i> .	MTOC	1-19	MTOC	1-19
<b><u>Chapter 1, Section 2.2</u></b> , <i>Sponsor</i> . Adds to Exclusions that a dependent is not entitled to benefits for any period during which the veteran (sponsor) is a fugitive felon.	1-2.2	1-3	1-2.2	1-2
<b><u>Chapter 1, Section 2.5</u></b> , <i>Child</i> . Policy content remains unchanged, but there are minor formatting revisions.	1-2.5	1-5	1-2.5	1-5
<b><u>Chapter 1, Section 2.6</u></b> , <i>Medicare</i> . Clarifies what documentation must be received from the Social Security Administration to determine CHAMPVA eligibility for a beneficiary under age 65.	1-2.6	1-5	1-2.6	1-5
<b><u>Chapter 1, Section 3.1</u></b> , <i>Application for Benefits</i> . Clarifies information that must be submitted to apply for CHAMPVA benefits; adds that OHI certification is required;	1-3.1	1-4	1-3.1	1-4

that the Social Security Administration must certify non-entitlement to Medicare benefits; and adds a list of optional documents that may be required with submission of an application.

<b><u>Chapter 1, Section 4.2</u></b> , <i>Meds by Mail (MbM)</i> . Adds that when using MbM, there is no cost share or deductible requirement.	1-4.2	1-1	1-4.2	1-1
<b><u>Chapter 2, Table of Contents</u></b> Adds new policy Chapter 2, Section 16.4, <i>Hospice</i> , and amends Chapter 2, Section 22.1 title from <i>Drugs and Medicines</i> to <i>Pharmacy</i> .	TOC-2	2-1-14	TOC-2	2-1-13
<b><u>Chapter 2, Section 2.3</u></b> , <i>Prophylactic Mastectomy</i> . Policy Considerations and Exclusions were slightly modified to provide clarity.	2-2.3	1-3	2-2.3	1-2
<b><u>Chapter 2, Section 2.4</u></b> , <i>Postmastectomy Reconstructive Breast Surgery</i> . Policy content is slightly modified to provide clarity.	2-2.4	1-3	2-2.4	1-3
<b><u>Chapter 2, Section 2.5</u></b> , <i>Reduction Mammoplasty for Macromastia</i> . Policy content remains unchanged, but there are minor formatting revisions.	2-2.5	1-3	2-2.5	1-3
<b><u>Chapter 2, Section 2.7</u></b> , <i>Stereotaxic (Stereotactic) Breast Biopsy</i> . Adds CPT codes 10021, 10022, and 19125 and adds to Policy Considerations that fine needle aspiration biopsy is covered for excision of a breast lesion only after preoperative placement of a radiologic marker.	2-2.7	1-2	2-2.7	1-2
<b><u>Chapter 2, Section 3.4</u></b> , <i>Immunotherapy For Malignant Disease</i> . Adds Exclusions for autolymphocyte therapy (ACT) or immunotherapy when used for treating metastatic kidney cancer patients.	2-3.4	1	2-3.4	1

<b><u>Chapter 2, Section 4.6</u></b> , <i>Percutaneous Transluminal Angioplasty (PTA)</i> . Corrects Related Authority Line; adds CPT code 75978; and adds reference to Chapter 3, Section 5.1, <i>Outpatient and Inpatient Professional Provider Reimbursement</i> .	2-4.6	1-2	2-4.6	1-2
<b><u>Chapter 2, Section 5.1</u></b> , <i>Adjunctive Dental Care</i> . Description and Policy content were modified to provide clarity; adds to Policy that a treatment plan is required for treatment of gingival hyperplasia and clarifies that removal of teeth/tooth fragments is covered only when required to treat a non-dental injury and adds an example of this scenario; adds to Exclusions that preparation for new or modification of existing bridge work or dentures are not covered.	2-5.1	1-9	2-5.1	1-9
<b><u>Chapter 2, Section 15.1</u></b> , <i>Evaluation and Management Services (Office Visits) General</i> . Adds clarity to Policy regarding the use of modifier –25.	2-15.1	1-4	2-15.1	1-4
<b><u>Chapter 2, Section 16.4</u></b> , <i>Hospice</i> . New policy providing guidance for hospice care.			2-16.4	1-5
<b><u>Chapter 2, Section 19.2</u></b> , <i>Electrical Stimulation of Bone</i> . Under Policy, clarifies when a nonunion fracture exists.	2-19.2	1-2	2-19.2	1-2
<b><u>Chapter 2, Section 22.1</u></b> , <i>Pharmacy</i> . Amends policy title from <i>Drugs and Medicines</i> to <i>Pharmacy</i> ; adds to Policy guidance for dispensing of prescription medications; under Policy Considerations adds coverage for insulin pumps and guidance for ordering drugs and medications from a foreign country; clarifies only 6 tablets of Viagra per month may be dispensed; removes listing of covered drugs; and adds to Exclusions (1) drugs prescribed in connection with cosmetic surgery	2-22.1	1-8	2-22.1	1-6

performed primarily to improve physical or psychological purposes without correcting or improving a bodily function, (2) drugs for the non-surgical treatment of obesity, dietary control, or weight reduction, (3) non-prescription contraceptives, (4) smoking cessation supplies, and (5) prescriptions written after the beneficiary's eligibility period has expired.

<b><u>Chapter 2, Section 26.9</u></b> , <i>Positron Emission Tomography (PET)</i> . Adds Effective Date and coverage for pet scan for breast cancer; and removes from Exclusions PET for the diagnosis, staging, and monitoring treatment of breast cancer.	2-26.9	1-4	2-26.9	1-3
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<b><u>Chapter 2, Section 29.17</u></b> , <i>Evaluation and, Management Services (Office Visits) With Surgery</i> . Adds clarity to Policy regarding the use of modifier –25.	2-29.17	1-2	2-29.17	1-2
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<b><u>Chapter 2, Section 31.4</u></b> , <i>Kidney Transplant</i> . Adds clarity to Policy and Policy Considerations regarding the affirmative patient selection criteria.	2-31.4	1-4	2-31.4	1-4
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<b><u>Chapter 3, Table of Contents</u></b> . Adds new policy Chapter 3, Section 11.1, <i>Hospice Reimbursement</i> .	TOC	1-3	TOC	1-3
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<b><u>Chapter 3, Section 9.1</u></b> , <i>Ambulance Services Reimbursement</i> . Adds Exclusion for night differential pay for ambulance services.	3-9.1	1-3	3-9.1	1-3
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<b><u>Chapter 3, Section 11.1</u></b> , <i>Hospice Reimbursement</i> . New policy providing information concerning hospice reimbursement.			3-11.1	1-3
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<b>Subject Index.</b> Amended to update and include policies referenced in this transmittal.	A-1 thru A-6 D-1 thru D-5 F-1 thru F-2 H-1 thru H-4 N-1 thru N-2 P-1 thru P-8	A-1 thru A-6 D-1 thru D-5 F-1 thru F-2 H-1 thru H-4 N-1 thru N-2 P-1 thru P-8
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**Codes Index.** Amends index to add and delete codes referenced in policies. Changes are highlighted in the index for reference purposes.

1-26

1-26

2. File this transmittal memorandum in the front of the CHAMPVA Policy Manual.

Susan Schmetzer  
Chief, Policy & Compliance

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